

DEPARTMENT OF VETERANS AFFAIRS HEALTH CARE PERSONNEL ACT OF 2000

The SPEAKER pro tempore. Under the Speaker's announced policy of January 19, 1999, the gentleman from Florida (Mr. STEARNS) is recognized during morning hour debates for 5 minutes.

Mr. STEARNS. Mr. Speaker, in all deference to my colleague from Oregon, the zero rating that he cited for Secretary Cheney in his voting while in Congress was from a group that is really very socialistic and makes its decisions based upon emotion and not upon science. Governor Bush is dedicated to making decisions on the basis of science and economics and not just emotions when it comes to our environment.

So I ask my colleague to review the record of Governor Bush and look carefully at the votes of Secretary Cheney with that in mind.

Mr. Speaker, I came down here this afternoon to speak about a bill, H.R. 5109, which is a bipartisan bill. It is called the Veterans' Affairs Health Care Personnel Act of 2000.

I chair the Subcommittee on Health and Veterans' Affairs, and we passed this bill. Tomorrow we are going to have a full markup. I want to bring this bill to the attention of my colleagues because I think all of them will want to cosponsor this.

About 10 years ago, the professional nursing corps at the Department of Veterans Affairs was in a crisis. VA was losing critical, even irreplaceable, assets from its clinical base. The Nation's hospitals in general were suffering acute shortages of trained nurses, and indeed the VA itself was viewed as a major recruitment source by these hospitals. Because of the nature of the payroll system for Federal employees, it is sort of a ponderous civil service system. VA was powerless to react in a highly competitive, volatile arena. The quality of care was in danger.

In the 101st Congress, we went ahead and tried to correct that, but we did not quite complete the job. So we had a hearing in the subcommittee earlier this year on the status of VA's work with special focus on the pay situation of VA nurses.

Mr. Speaker, what we found was very disappointing. In fact, we learned that many VA nurses had not received any increases in pay since our 1990 legislation 10 years ago. While those initial pay increases were in many cases substantial, in the course of time, other VA employee groups had caught up because of the annual comparability raises available to every Federal employee. So the nurses of the VA found themselves in a situation that they were not competitive, they were at a disadvantage, and some were leaving to go to the private sector. And this is again creating a crisis.

We in the Veterans' Affairs cannot afford to lose these specialized individuals. Therefore, in addition to the guaranteed national pay raises for nurses that was put in our bill, the subcommittee has crafted necessary adjustments to the locality survey mechanism, which is a special formula that is set up to take care of nurses and their pay increases to ensure that data are available when needed and to specify that certain steps be taken when they were necessary that lead to these appropriate salary increases for their nurses.

Mr. Speaker, this bill also addresses recommendations of the VA's Quadrennial Pay Report concerning VA dentists. Now, this is another area where we are losing specialized people. We want to bring their pay up to contemporary balance with compensation of hospital-based dentists in the private sector, or we are going to lose all the dentists in the VA system. This is the first change in 10 years in VA dentists special pay.

Our bill also addresses a very important area dealing with Vietnam veterans. At the instigation of the gentleman from Illinois (Mr. EVANS), who is the ranking minority member of the full committee, he brought up the idea of reauthorizing the landmark 1988 study of posttraumatic stress disorder in Vietnam veterans. Our bill would reauthorize this study. I look forward to working with the gentleman from Illinois (Mr. EVANS) on passage of this bill.

The bill also requires the VA to record military service history when VA veterans come in to talk to physicians about their health care history. This will aid any veteran who subsequently files a claim of disability, especially given our newfound acquisition of knowledge with the Gulf War Syndrome, and that military combat causes stress, exposures may be associated with pesticides and other things, and all this might lead to disease later in life.

So I want to commend the Vietnam Veterans of America for bringing this proposal to me. It is a valuable contribution to this bill.

Finally, I want to talk about another very innovative idea that is crafted in this bill with the help of the gentleman from Florida (Mr. WELDON). His proposal will set up a pilot program involving not more than four VA clinic service areas. Within these areas, enrolled veterans in need of uncomplicated hospital admissions would be referred to community hospitals rather than being sent to VA Hospitals.

So if there are far distances from these hospitals, they will be able to go to a local hospital. We found out that this saves 15 percent in cost savings.

So, Mr. Speaker, I urge all of my colleagues to support my bill, and I look forward to its passage on the House floor.

Our bill is bipartisan and major provisions of it are already endorsed by several organizations, including Vietnam Veterans of America, the Nursing Organization of Veterans Affairs and the American Dental Association, and the largest federal union, the American Federation of Government Employees (AFGE), among others.

IN RECOGNITION OF DR. DIANA S. NATALICIO, PRESIDENT OF UNIVERSITY OF TEXAS AT EL PASO

The SPEAKER pro tempore. Under the Speaker's announced policy of January 19, 1999, the gentleman from Texas (Mr. REYES) is recognized during morning hour debates for 5 minutes.

Mr. REYES. Mr. Speaker, I rise today to recognize Dr. Diana S. Natalicio, an outstanding individual and role model in both the Hispanic and academic community.

Dr. Natalicio is currently president of the University of Texas at El Paso, otherwise known as UTEP, a position that she has held since 1988. She received her bachelor's degree in Spanish from St. Louis University; her master's degree in Portuguese; and a doctorate in linguistics was awarded by the University of Texas at Austin.

In 1961, she was a Fulbright Scholar in Rio de Janeiro, Brazil; and in 1964, she was a visiting scholar in Lisbon, Portugal. After serving as a research associate at the Center for Communication Research at the University of Texas at Austin, Dr. Natalicio joined the faculty of UTEP in 1971 as a part-time assistant professor. She quickly rose to the rank of associate professor and then professor.

In addition to her teaching responsibilities in the Department of Linguistics and Modern Languages, she has served UTEP in numerous administrative capacities, including chairman of Modern Languages, associate dean and dean of Liberal Arts, vice president for Academic Affairs, interim president, and finally as president in today's capacity.

Dr. Natalicio has served on numerous boards and commissions, appointed to those boards and commissions by President Clinton, former President Bush, and Governor Bush as well. Some of them are the National Science Board, NASA Advisory Council, the Fund for the Improvement of Postsecondary Education, the "America Reads Challenge" Steering Committee, the Advisory Commission on Educational Excellence and many, many others that are important in her role as president of a dynamic university.

Dr. Natalicio has received countless awards and honors, which include the Harold W. McGraw, Jr. Prize in Education, the Outstanding Contribution to Education Award by the Hispanic and Business Alliance for Education, the Humanitarian Award from the

League of United Latin American Citizens, and the distinguished Professional Women's Award.

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In 1999, Mr. Speaker, Dr. Natalicio was inducted into the Texas Women's Hall of Fame. She has also written numerous books, articles and reviews in the field of applied linguistics.

Under Dr. Natalicio's leadership, UTEP has become the largest Hispanic majority university in the Nation. Its budget has increased from \$64 million in 1988 to over \$146 million today, and its doctoral programs have grown from 1 to 8 programs and it is still growing.

In the last decade, Dr. Natalicio has been an effective and increasingly influential individual in raising the visibility and the funding of the University of Texas at El Paso.

Dr. Natalicio began visiting Washington, D.C. some 10 years ago in an attempt to solicit Federal research dollars. At the time, Dr. Natalicio today reflects, they did not even know who UTEP was. I had to go and create an identity for the institution in Washington, D.C.

UTEP's Federal research grants have increased to \$53 million last year from \$3.5 million in 1987. The university spent some \$27.8 million in 1999 moving up to fifth place among the State's 35 public academic universities in actual expenditures for Federal money.

Dr. Natalicio has constantly pushed UTEP towards becoming a Tier 1 research university. In May of 1997, under the leadership of Dr. Natalicio, UTEP embarked on an unprecedented fundraising effort called the Legacy Campaign, an initiative which, to date, has raised some \$50 million in new endowments, tripling the university's total endowment from \$25 million to over \$75 million today.

Within one year, Dr. Natalicio has announced that the university's Legacy Campaign has raised \$45 million, 95 percent of its goal. This generous financial commitment has resulted in the creation of more than 200 new endowments, including 80 newly endowed scholarships; 26 new professorships and chairs; and 48 new departmental excellence funds.

Dr. Natalicio's efforts to expand UTEP's Development and Alumni Affairs office has resulted in a steady increase in annual giving to the university. Dr. Natalicio further is proud of the accomplishments and can be traced to the courageous decisions and an appreciation for the contributions of others. She has been an instrumental force in transforming UTEP from a regional institution to an international university whose vision is outward and whose growth and phenomenal success in garnering additional funds for new programs are the envy of other universities. She is responsible for developing, during radically changing times,

an atmosphere in which students, faculty, and staff are stimulated, inspired, and challenged.

VOTE AGAINST WELFARE FOR LARGE MULTINATIONAL CORPORATIONS

The SPEAKER pro tempore (Mr. ISAKSON). Under the Speaker's announced policy of January 19, 1999, the gentleman from California (Mr. STARK) is recognized during morning hour debates for 5 minutes.

Mr. STARK. Mr. Speaker, later today we will have an opportunity to vote on H.R. 4986, the FSC replacement bill. That is a foreign sales tax credit that was inaugurated by President Nixon in which the Washington Times recently, in an editorial, referred to it as one of the largest bipartisan and unanimous blunders passed by the House of Representatives.

In the early seventies, I opposed the FSC bill, or the foreign sales tax credit, and was successful at least in denying that tax credit to weapons manufacturers, on the theory that all weapons sold to foreign countries had to be approved by the Defense Department and the Secretary of State and basically were sold by our government to other governments, and there was no reason to give a subsidy, which is what this FSC thing is, to weapons manufacturers in the United States.

The Senate saw fit to reduce that to a 50 percent limitation and that has been the law for some 20 years. Recently, without any hearings and without any discussion, almost in the dead of night, the 50 percent limitation to defense contractors was removed. The World Trade Organization has filed a lawsuit against the United States saying that this foreign sales tax credit is a hidden subsidy, and they are right. It is a subsidy. It is being changed now in language in this bill that will come up under suspension, but the old saying, it is a duck if it quacks like a duck and it waddles like a duck. In this case, it quacks like a subsidy and it gives money back to companies out of the taxpayers' pocket to subsidize sales overseas.

What is perhaps most egregious at this time is that we are now cutting taxes to and for U.S. pharmaceutical companies to get the U.S. pharmaceutical companies to sell cheaper drugs to foreigners while at the same time selling them at higher prices here at home to our seniors. That is what will be done if my colleagues vote for 4986, and they should vote no.

The pharmaceutical industry does not need another corporate subsidy at the expense of the American taxpayer. Why give an incentive for the pharmaceutical companies when they sell their products to other developed nations for less than we can buy them here? I offered an amendment to say

that pharmaceutical companies could not have this subsidy if they were selling their drugs for 5 percent more in this country than they sell in Canada and Mexico. That, unfortunately, was defeated.

We have shown, or studies have shown, that the American seniors are without drug coverage, pay almost twice as much for their pharmaceutical drugs as do our neighbors in Canada and Mexico. Why on Earth we should be giving companies like Merck, already one of the most profitable drug companies in the world, with more than twice the profits of, say, engineering and the construction industry, why we should give them an additional subsidy to continue to sell drugs for less money in Canada and Mexico and Germany and Japan than they do to the seniors in my district in Fremont, California, escapes me.

I hope that my colleagues will see the nonsense in this bill. It is being run through. We will not even see a report. They have held the report up so nobody can read that. There were a few of us on the committee who signed dissenting views. It is a bad bill. It does nothing but take money from the average senior, the average purchaser of pharmaceutical drugs, and give it to the richest companies in this country.

Mr. DOGGETT. Mr. Speaker, will the gentleman yield?

Mr. STARK. I yield to the gentleman from Texas.

Mr. DOGGETT. Mr. Speaker, if I understand what the gentleman is saying, we, of course, are well aware that America's seniors, indeed uninsured people in America of all ages, a young family that has a sick child that does not have insurance, these individuals across America, millions of them, are paying the highest price for drugs of anyplace in the entire world, and an American pharmaceutical company under this bill can continue to do that, to charge them the highest prices in the world and export the same drug to another country, whether it is Canada, Europe, wherever.

Mr. STARK. Precisely. My Zucor, which got my cholesterol down from 220 to 160, great stuff, 1,200 bucks a year for Zucor. Fortunately, Blue Cross pays some of that for me. I could buy the same drug in Canada for \$600. And I am giving this company a subsidy so they can sell it for less in Canada and I have to pay more for it here? I cannot figure that out.

Mr. DOGGETT. That is the vote we will be taking today, whether to reward these companies that charge Americans more money than anywhere else in the world, reward them by giving them a tax subsidy?

Mr. STARK. That is what it seems to me, and that seems like a dumb idea, and I hope the gentleman and my colleagues will vote no.